

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00502849		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name (Last, First, Middle Initial) of Payee <b>Fortune Media, Inc.</b>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 04 / 04 / 2012		
Mailing Address 527 Avenue B			Amount <span style="border: 1px solid black; padding: 2px;">70000.00</span>		
City Redondo Beach		State CA	Zip Code 90277-4183		
Purpose of Expenditure Television advertisement and production		Category/ Type 004	Transaction ID : SE.4690		
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY T HOLDEN			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 17		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">70000.00</span>			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee			Date		
Mailing Address			<span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		
City			Amount		
State		<span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>			
Zip Code		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Purpose of Expenditure		Category/ Type		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">70000.00</span>					
(a) SUBTOTAL of Itemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;">70000.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">70000.00</span>		
(c) TOTAL Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;">70000.00</span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Jonathan Martin		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 04 / 04 / 2012	